

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 63

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Tennessee Republican Party Federal Election Account**

Full Name (Last, First, Middle Initial)

**A. Mr. Martin Daniel**

Mailing Address 1834 Duncan Woods Ln

City

Knoxville

State

TN

Zip Code

37919-9150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Of Tennessee

Occupation

State Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	5

**Transaction ID : A214120963C194FCBB5C**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Jeffrey Miles**

Mailing Address 3420 Valley Brook Rd.

City

Nashville

State

TN

Zip Code

37215-2021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Miles Organization, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	5

**Transaction ID : A6A2D6E68747E455CB2F**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Mr. David Rutherford**

Mailing Address 4206 Willow Way

City

Morristown

State

TN

Zip Code

37814-1606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hamblen County

Occupation

Cty. Pty. Second Vice Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	5

**Transaction ID : ACB2CC33BE053460583F**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00